



Food Vendor Application

Business Name (as it is to appear in advertising): _____

Contact: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail Address: _____

Facebook URL: _____

ATTACH MENU OF FOOD & ITEMS TO BE SOLD WITH PRICES

All food and items must be approved by Festival Committee prior to Event

Vendors that cook on site must fill out a Health Department Permit Application
It is the RESPONSIBILITY OF THE VENDOR to contact Carteret County Health Department at (252)-728-8550 regarding the possible need of a permit, and rules required. ***PERMIT MUST BE WITH YOU AT THE FESTIVAL***

Rates:

_____ Concession (Mobile Unit Type) Food Vendor - \$150.00

_____ Other Food (10x10 Space) - \$100.00

NO POWER WILL BE AVAILABLE

Will you be bringing: _____ Tent _____ (Size) _____ Enclosed Trailer _____ (Size) _____ Generator

Special Requests: _____

(We will attempt to accommodate special requests, however, due to the number of vendors not every request will be honored.)

***Vendor setup locations are the discretion of the Festival Committee**

Set up is Friday, June 1st beginning at 12:00pm and Saturday, June 2nd at 6:00am.

Food vendor hours are Friday from 4:00pm-8:00pm or later and Saturday 10:00am to 8:00pm or later.

If you choose not to participate both days same rate applies. Vendor fees are NON-REFUNDABLE.

Applications are due along with payment no later than **Saturday, May 26th**

Total Amount: \$ _____ Card Type: _____ Visa _____ Mastercard _____ Discover _____
CC#: _____ Exp Date: _____/_____/_____ (mm/yy)
Contact Name: _____ CVV2 (3 or 4 digits) _____
Mailing Address: _____ City _____ State _____ Zip _____

I authorize the Cruisin' to the Cape Festival to charge the card indicated above and I certify that I am the authorized user of this credit card and that I will not dispute payment so long as the transaction corresponds to the terms of this agreement.

Cardholder Signature: _____ Date: _____

Make checks payable to: **Mac Daddy's** (\$30 fee on all returned checks)

Mail to: Mac Daddy's, Atten: Tracy Gillikin at 130 Golfing' Dolphin Dr. Cape Carteret, NC 28584

For additional information, please contact connie@mymacdaddys.com or tracy@mymacdaddys.com at 252-393-6565.